PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			16 minus 20=		• 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		* ()			X40=		OR	X80=		
MU	TIPLE DEPEN	DENT CLAIM P	ESENT					+135=	-	OR	+270=		
* If	the difference	in column 1 is	less than zer	ess than zero, enter "0" in column a			L	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II								SMALL ENTITY			OTHER THAN SMALL ENTITY		
	2 M Car 6 3 6 1 8 1 3	(Column 1) CLAIMS	P -	(Colui		(Column 3)	1 r	SWALL		OR I	SWALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 10032	Minus	·· 2	0	=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	***	T CL AIM]=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEET	·		ADDI1. 1 CC1		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= ']	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			
							l	+135=		OR	+270=		
		•					,	TOTAL ADDIT. FEE	<u> </u>	OR	TOTAL ADDIT. FEE		
		(Column 1)			ımn 2)	(Column 3))_			•	•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	IT OL AIL	=	┨╏	X40=		OR	X80=		
┞	LINOI PHESE	ENTATION OF N	HOLITE DEF	CINDEN	II CLAIN		┙╽	+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Nur	mber Previously Pa	aid For" (Total or	r Indepen	dent) is th	e highest numb	per fou	and in the ap	propriate bo	x in co	olumn 1.		